IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF OHIO

Arthur Scot	t)c.	1:23-cv-00102
	NAME OF THE PLAINTIFF IN THIS ACTION)	J. McFarland M.J. Bowman
IF THE PLAINTIFF IS	A PRISONER: PRISONER # 774-903	Wi.g. Downlan
	V8	
	NAME OF THE DEFENDANT IN THIS ACTION)	
IF THERE ARE ADDIT	TONAL DEFENDANTS PLEASE LIST THEM:	
gomate JeF	ferson	
	COMPLAINT	
I. PARTIES TO T	HE ACTION:	
PLAINTIFF:	PLACE YOUR NAME AND ADDRESS ON THE LINES ADDRESS YOU GIVE MUST BE THE ADDRESS THA CONTACT YOU AND MAIL DOCUMENTS TO YOU. NUMBER IS REQUIRED.	T THE COURT MAY
	NAME - FULL NAME PLEASE - PRINT	
	POBOX 45699 LUCOSVIILE, OH	45699
	ADDRESS: STREET, CITY, STATE AND ZIP CODE	
	southern objecorrectionals	Facility
		-1
	(<u>740)</u> 259-5544	
	TELEPHONE NUMBER	

IF THERE ARE ADDITIONAL PLAINTIFFS IN THIS SUIT, A SEPARATE PIECE OF PAPER SHOULD BE ATTACHED IMMEDIATELY BEHIND THIS PAGE WITH THEIR FULL NAMES, ADDRESSES AND TELEPHONE NUMBERS. IF NO ADDITIONAL PLAINTIFFS EXIST CONTINUE WITH THIS FORM.

PAGE 2 AND 3 OF THIS FORM DEAL ONLY WITH A PLAINTIFF THAT IS INCARCERATED AT THE TIME OF FILING THIS COMPLAINT.

Case: 1:23-cv-00102-MWM-SKB Doc #: 10 Filed: 05/15/23 Page: 2 of 6 PAGEID #: 55 IF YOU ARE A PRISONER FILING A CIVIL SUIT THE FOLLOWING INFORMATION IS REQUIRED:

PREVIOUS LAWSUITS:

- A. HAVE YOU BEGUN OTHER LAWSUITS IN STATE OR FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION OR OTHERWISE RELATING TO YOUR IMPRISONMENT? YES () (NO) ()
- B. IF YOUR ANSWER TO A IS YES, DESCRIBE THE LAWSUIT IN THE SPACE BELOW. (IF THERE IS MORE THAN ONE LAWSUIT, DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THE SAME OUTLINE.)
 - 1. PARTIES TO THIS PREVIOUS LAWSUIT

	Arthurlerry
-	
D	DEFENDANTS:
_	
_	
	COURT (IF FEDERAL COURT, NAME THE DISTRICT: IF STATE COUR NAME THE COUNTY)
	OOCKET NUMBER
<u> </u>	NAME OF THE JUDGE TO WHOM THE CASE WAS ASSIGNED
	DISPOSITION (FOR EXAMPLE, WAS THE CASE DISMISSED? WAS IT APPEALED? IS IT STILL PENDING?)
A	APPROXIMATE DATE OF THE FILING OF THE LAWSUIT
	The Aller of the Care of the C

A.	IS YE	THERE A PRISONER GRIEVANCE PROCEDURE IN THIS INSTITUTION?	
В.	DII PRI	DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT IN THIS STATE PRISONER GRIEVANCE PROCEDURE? YES () NO ()	
C.	C. IF YOUR ANSWER IS YES:		
	1.	What steps did you take?	
	2.	what was the result? they said it was not enough information	
		they said it was not enough information	
D.	IF Y	OUR ANSWER IS NO, EXPLAIN WHY NOT.	
	_		
	_		
E.	IF T YOU	THERE IS NO PRISON GRIEVANCE PROCEDURE IN THIS INSTITUTION, DID U COMPLAIN TO PRISON AUTHORITIES? YES () NO ()	
F.	IF Y	OUR ANSWER IS YES:	
	1.	WHAT STEPS DID YOU TAKE?	
	2.	WHAT WAS THE RESULT?	

DE	FFN	DAN	JTS.

PLACE THE NAME AND ADDRESS OF EACH DEFENDANT YOU LISTED IN THE CAPTION OF	ON
THE FIRST PAGE OF THIS COMPLAINT. THIS FORM IS INVALID UNLESS EACH DEFENDA	NT
APPEARS WITH FULL ADDRESS FOR PROPER SERVICE.	

DDRESS - STREET, CITY, STATE AND ZIP CODE	the Property of
Po Box 56 hebanon, OH 45036	
	- 124 AM
	×_ = ==================================

IF THERE ARE ADDITIONAL DEFENDANTS, PLEASE CONTINUE LISTING THEM.

PLEASE WRITE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE. DESCRIBE HOW EACH DEFENDANT IS INVOLVED. INCLUDE THE NAME OF ALL PERSONS INVOLVED. GIVE DATES AND PLACES.

DO NOT GIVE ANY LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES.

IF YOU HAVE A NUMBER OF DIFFERENT CLAIMS; PLEASE NUMBER AND SET FORTH EACH CLAIM IN A SEPARATE PARAGRAPH. USE AS MUCH SPACE AS YOU NEED. YOU ARE NOT LIMITED TO THE PAPERS WE GIVE YOU. ATTACH EXTRA SHEETS THAT DEAL WITH YOUR STATEMENT CLAIM IMMEDIATELY BEHIND THIS PIECE OF PAPER.

on April 2014 2022 I was stabed by in mate Jefferson
On April 26th 2022 I was stabed by in mate Jefferson Inside our cell cell 6001] black rebanon corrections
I was Denied my right to press charges on my attacker
and a 150 i Fe 1+ discriminated against due to past
mistakes in my back round and being gay

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IN THIS SECTION PLEASE STATE (WRITE) BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENT, CITE NO CASES OR STATUTES.
"would like the court to consider compensation that is
Fair and i would also like the court to consider my mental
hewith state after this incldent i really did suffer
From ptsd and other mental health like anxiety—and
deppression
SIGNED THIS
authu Jewy Loth p. SIGNATURE OF PLAINTIFF
the control of the co